

TRANSMITTAL
FORM

Application Serial Number	09/771,526
Filing Date	January 29, 2001
First Named Inventor	Dobrounig
Group Art Unit	3711
Examiner Name	S. Wong
Attorney Docket No.	ADI-020C1 (257/25)
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] 		
<input checked="" type="checkbox"/> Petition for Extension of Time		
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations 		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 		

RECEIVED

JUN 24 2002

TC 3700 MAIL ROOM

CORRESPONDENCE ADDRESS

SIGNATURE BLOCK

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

Date: June 7, 2002
 Reg. No. 42,545
 Tel. No.: (617) 248-7675
 Fax No.: (617) 248-7100

Respectfully submitted,


 John V. Forcier
 Attorney for Applicant
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110



<i>Complete if Known</i>	
Application Serial Number	09/771,526
Filing Date	January 29, 2001
First Named Inventor	Dobrounig
Group Art Unit	3711
Examiner Name	S. Wong
Attorney Docket No.	ADI-020C1 (257/25)

METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																			
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>400</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>920</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1440</td><td>720</td><td>Extension for reply within fourth month</td><td>920.00</td></tr> <tr><td>1960</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>320</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>320</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>280</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>740</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>740</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> </tbody> </table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		400	200	Extension for reply within second month		920	460	Extension for reply within third month		1440	720	Extension for reply within fourth month	920.00	1960	980	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		740	370	Filing a submission after final rejection (37 CFR 1.129(a))		740	370	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify) _____				Other fee (Specify) _____			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																					
130	65	Surcharge - late filing fee or oath																																																																																						
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																						
130	130	Non-English specification																																																																																						
2,520	2,520	Request for ex parte reexamination																																																																																						
110	55	Extension for reply within first month																																																																																						
400	200	Extension for reply within second month																																																																																						
920	460	Extension for reply within third month																																																																																						
1440	720	Extension for reply within fourth month	920.00																																																																																					
1960	980	Extension for reply within fifth month																																																																																						
320	160	Notice of Appeal																																																																																						
320	160	Filing a brief in support of an appeal																																																																																						
280	140	Request for oral hearing																																																																																						
130	130	Petitions to the Commissioner																																																																																						
180	180	Submission of Information Disclosure Statement																																																																																						
740	370	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																						
740	370	For each additional invention to be examined (37 CFR 1.129(b))																																																																																						
100	100	Certificate of Correction for applicant's error																																																																																						
Other fee (Specify) _____																																																																																								
Other fee (Specify) _____																																																																																								
1. FILING FEE Large Entity <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>740</td><td>Utility filing fee</td><td></td></tr> <tr><td>330</td><td>Design filing fee</td><td></td></tr> <tr><td>160</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>Total Claims</td><td>- 20 =</td><td></td><td>x \$ 18.00 =</td><td></td></tr> <tr><td>Independent Claims</td><td>- 3 =</td><td></td><td>x \$ 84.00 =</td><td></td></tr> <tr><td><input type="checkbox"/> Multiple Dependent Claim(s), if any</td><td></td><td></td><td>\$280.00 =</td><td></td></tr> </tbody> </table> <p style="text-align: center;">TOTAL: SMALL ENTITY DISCOUNT: SUBTOTAL (1) (\$)</p>					Fee (\$)	Fee Description	Fee Paid	740	Utility filing fee		330	Design filing fee		160	Provisional filing fee			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 18.00 =		Independent Claims	- 3 =		x \$ 84.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =		2. AMENDMENT CLAIM FEES <table border="1"> <thead> <tr> <th>Claims Remaining</th> <th>Highest No. Previously</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Total</td><td>-</td><td>=</td><td>x \$ 18.00 =</td><td></td></tr> <tr><td>Indep.</td><td>-</td><td>=</td><td>x \$ 84.00 =</td><td></td></tr> <tr><td><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td></td><td></td><td>+ \$280.00 =</td><td></td></tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>(\$)</th> </tr> </thead> <tbody> <tr><td>TOTAL:</td><td>(S)</td></tr> <tr><td>SMALL ENTITY DISCOUNT:</td><td>(S)</td></tr> <tr><td>SUBTOTAL (2)</td><td>(S)</td></tr> </tbody> </table> <p style="text-align: right;">SUBTOTAL (3) (\$) 920.00</p> <table border="1"> <thead> <tr> <th></th> <th>(\$)</th> </tr> </thead> <tbody> <tr><td>SUBTOTAL (1)</td><td>0</td></tr> <tr><td>SUBTOTAL (2)</td><td>0</td></tr> <tr><td>SUBTOTAL (3)</td><td>920.00</td></tr> </tbody> </table> <p style="text-align: right;">TOTAL (\$) 920.00</p>				Claims Remaining	Highest No. Previously	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 18.00 =		Indep.	-	=	x \$ 84.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =			(\$)	TOTAL:	(S)	SMALL ENTITY DISCOUNT:	(S)	SUBTOTAL (2)	(S)		(\$)	SUBTOTAL (1)	0	SUBTOTAL (2)	0	SUBTOTAL (3)	920.00												
Fee (\$)	Fee Description	Fee Paid																																																																																						
740	Utility filing fee																																																																																							
330	Design filing fee																																																																																							
160	Provisional filing fee																																																																																							
	Number Filed	Number Extra	Rate	Amount																																																																																				
Total Claims	- 20 =		x \$ 18.00 =																																																																																					
Independent Claims	- 3 =		x \$ 84.00 =																																																																																					
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =																																																																																					
Claims Remaining	Highest No. Previously	Present Extra	Rate	Fee Paid																																																																																				
Total	-	=	x \$ 18.00 =																																																																																					
Indep.	-	=	x \$ 84.00 =																																																																																					
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =																																																																																					
	(\$)																																																																																							
TOTAL:	(S)																																																																																							
SMALL ENTITY DISCOUNT:	(S)																																																																																							
SUBTOTAL (2)	(S)																																																																																							
	(\$)																																																																																							
SUBTOTAL (1)	0																																																																																							
SUBTOTAL (2)	0																																																																																							
SUBTOTAL (3)	920.00																																																																																							
CORRESPONDENCE ADDRESS Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100					SIGNATURE BLOCK <div style="text-align: right;"> <i>[Signature]</i> Respectfully submitted, John V. Forcier Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 </div>																																																																																			



COPY OF PAPERS
ORIGINALLY FILED

3711
SA
PATENT

Attorney Docket No. ADI-020C1 (257/25)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Dobrounig CONFIRMATION NO.: 9695
SERIAL NO.: 09/771,526 GROUP NO.: 3711
FILING DATE: January 29, 2001 EXAMINER: S. Wong
TITLE: Football

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, Washington, DC 20231 on this 7th day of June, 2002.

Tabitha Crosier

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

1. Amendment and Response to Office Action (2 pages);
2. Petition for Extension of Time (1 page);
3. Transmittal Form (1 page);
4. Fee Transmittal (1 page);
5. Check in the amount of \$920; and
6. Return receipt postcard.

RECEIVED
JUN 24 2002
C 3700 MAIL ROOM